

106057

August-28-13 12:36:20 PM

N900040100

Setup Start *NS1*

Stop *NS2*

5

Cust Item ID:

5

Customer:

Reference:

Run Start *NR1*

Date:

Stop *NR2*

Date:

[illegible]

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Misabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

Work Order ID 106057

106057

Page 2

August-28-13 12:36:20 PM

Item ID: 646.3311

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: RH Half

Start Date: 8/28/13 Start Qty: 5.00

5

Cust Item ID:

Required Date: 8/28/13 Req'd Qty: 5.00

5

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Run Start *NR1*

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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130

QC8- Inspect parts - second check

0.00

OK 13/09/15

5 0

130

QC

Memo

0.00

Quality Control

131

0.00

131

HandFinish

Memo

0.00

Hand Finishing

CLEAN AND REMOVE ALL PART MARKING

N/A

140

Outsource process-Anodize per QSI017 4.1.10.1

0.00

140

Outsource4

Memo

0.00

Outsource process - Anodize

Issue P/O to ATG : 21431

1- Black Anodize as per Dwg 646.3300

2- PRIME AS PER DWG, SEE NOTE #2

Certification of Conformity is required

CL 13/09/20 5

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

FAULT CATEGORY

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

Work Order ID 106057

106057

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August-28-13 12:36:20 PM

Item ID: 646.3311

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: RH Half

Start Date: 8/28/13 Start Qty: 5.00

5

Cust Item ID:

Required Date: 8/28/13 Req'd Qty: 5.00

5

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____
QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Run Start *NR1*
Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
150	Receive & Inspect for Damage & Mat'l Certs	0.00							
150						5x			SP
Packaging	Memo	0.00							13-10-4.
Packaging									
155	QC5- Inspect part completeness to step on W/O	0.00							
155						S			
QC	Memo	0.00							
Quality Control									
180	Identify as per dwg & Stock Location: <u>Composite</u>	0.00							
180						5			whl 13.10.28
Packaging	Memo	0.00							
Packaging	***IDENTIFY AS PER APICAL MPP-120 BY STAMPING P# AND REV***								

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		

Work Order ID 106057***106057***

Page 4

August-28-13 12:36:20 PM

Item ID: 646.3311

Accept

N900040100Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: RH Half

Start Date: 8/28/13 Start Qty: 5.00

5

Cust Item ID:

Required Date: 8/28/13 Req'd Qty: 5.00

5

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start ***NR1***

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop ***NR2***Sequence ID/
Work Center IDOperation
DescriptionSet Up/
Run Hours

Tool ID

Tool #

Plan
CodeAccept
QtyReject
QtyReject
NumberInsp.
Stamp

190

QC21- Final Inspection - Work Order Release

0.00

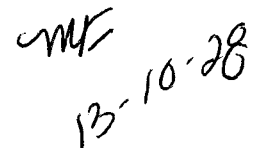
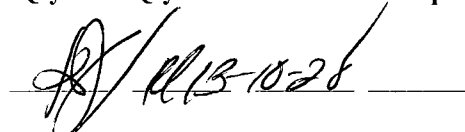
190

QC

Memo

0.00

Quality Control



NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width:100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

Picklist Print

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Page 1

Work Order ID: 106057
Parent Item: 646.3311
Parent Item Name: RH Half

Start Date: 8/28/13

Required Date: 8/28/13

Start Qty: 5.00

Required Qty: 5.00

Comments: IPP REV:A NEW ISSUE 12/11/27 JFS VERIFY BY: JLM

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
M7075T6B7.000X2.000 7075-T6 BAR 7.000" X 2.000" (order in billets)		Purchased	No				f	28.0202		5.8684211			

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
MAT001	28.0202	
124030	2.445	
M126143	3.2752	
→ M126615	22.3	

5.87 CML 13/09/10

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

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Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width:100%; border: none;"> <tr> <td style="width:25%;">Skid-tube <input type="checkbox"/></td> <td style="width:25%;">Crosstube <input type="checkbox"/></td> <td style="width:25%;">Water Jet <input type="checkbox"/></td> <td style="width:25%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled
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<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

DART AEROSPACE LTD		Work Order: 106057
Description: RH HALF		Part Number: 646.3311
Inspection Dwg: 646.3300 Rev: N/C		Page 1 of 1

FIRST ARTICLE INSPECTION CHECKLIST

Drawing Dimension	Tolerance	Actual Dimension	Accept	Reject	Method of Inspection	Comments
7.296	+/- .005	7.299	✓		H-6	31006
3.767	+/- .005	3.768	✓		"	"
0.457	+/- .005	0.458	✓		"	"
0.313	+/- .005	0.3145	✓		"	"
0.710	+/- .005	0.712	✓		"	"
6.469	+/- .005	6.471	✓		"	"
10.116	+/- .005	10.117	✓		"	"
10.309	+/- .005	10.310	✓		"	"
φ 0.177	+ .005 / - .001	φ 0.178	✓		Vern	GA-01
φ 0.209	+ .005 / - .001	φ 0.210	✓		"	"
0.250	+/- .005	0.251	✓		Mic	GA-03
1.250	+/- .005	1.250	✓		Vern	GA-01
R0.125	+/- .005	R0.125	✓		R-6	ref.
3.513	+/- .005	3.514	✓		H-6	31006
8.375	+/- .005	8.376	✓		"	"
0.250	+/- .005	0.250	✓		Mic	GA-03
8.1°	+/- .5°	8.1°	✓		Angle M.	CNC-02
11.689	+/- .005	11.690	✓		H-6	31006
11.250	+/- .005	11.251	✓		"	"
0.200x45°	+/- .005	0.195x45°	✓		Vern	GA-01

Measured by: D.A. DAS	Audited by: [Signature]	Preliminary Approval:
Date: 13/09/12	Date: 13/09/15	Date:

Rev	Date	Change	Revised by	Approved
E	10.04.14	Added preliminary approval	KJ	

10.04.15

APICAL
INDUSTRIES, INC.

ENGINEERING CHANGE NOTICE NO. 03724

SHEET 1 OF 1

DWG NO. 646.3300

REV: N/C

PREPARED
BY B. PETERS

DATE: 12/05/12

EFFECT ON DWG
☐ INC. ☒ UNINC.

DWG TITLE: UPPER CUTTER ASSY

APPROVED BY:

ENGR

MFG

QC

EFF:

NEXT ORDER

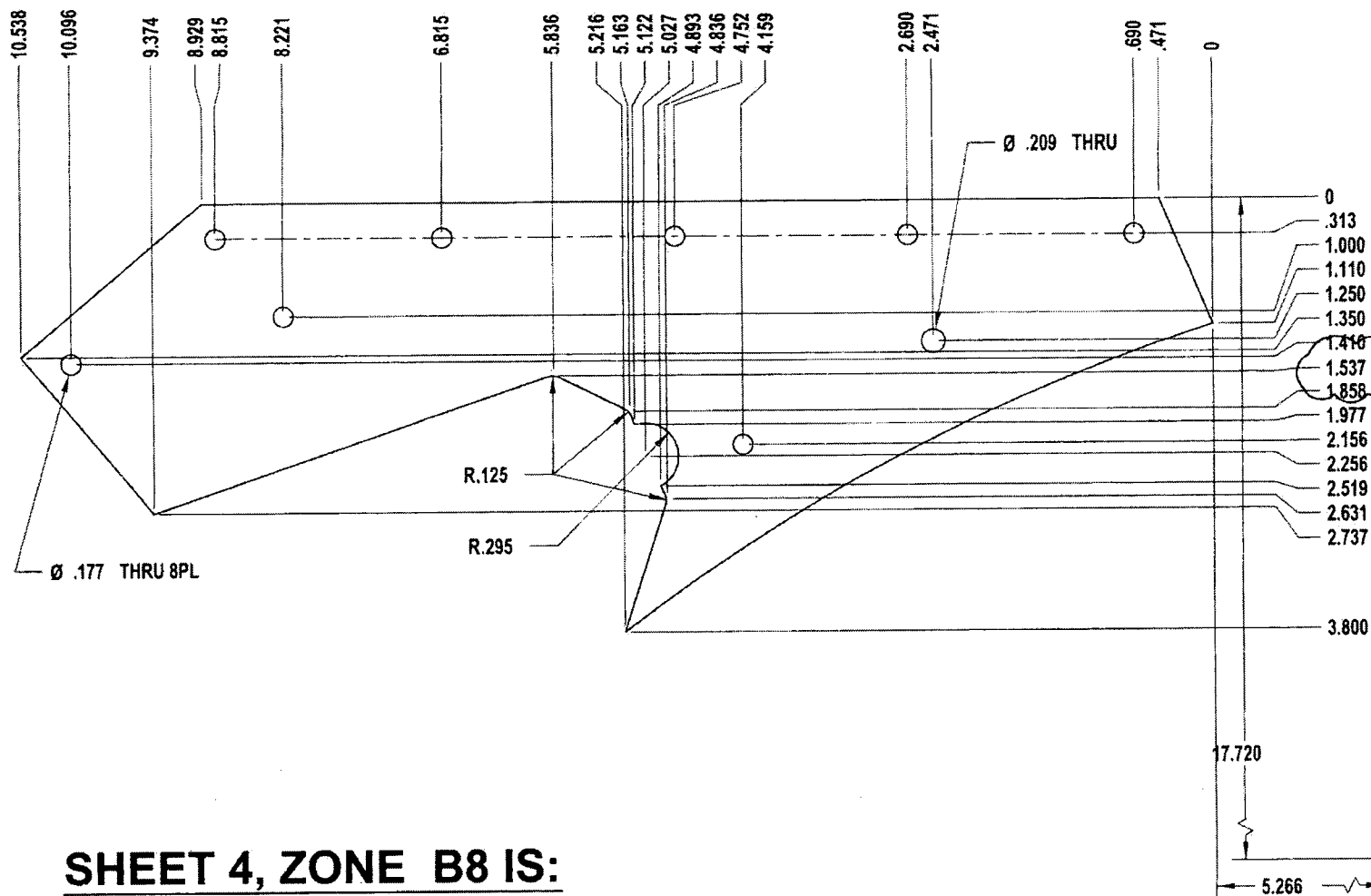
TRANSACTION CODES (TC):
A-ADD C-CREATE
R-REVISE D-DELETE

REASON:

REVISED ORDINATE DIMENSION.

ECR:

D-12-025



STANDARD
COPY
OF
ENGINEERING
UNCONTROLLED COPY
NOT TO BE USED FOR
WORK ORDER
10.6053 MLJ

130829

SHEET 4, ZONE B8 IS:

DOCUMENTS EFFECTED:

☐ RFMS ☐ MDL ☐ INSTALL INSTRUC ☐ ICA ☐ BOM

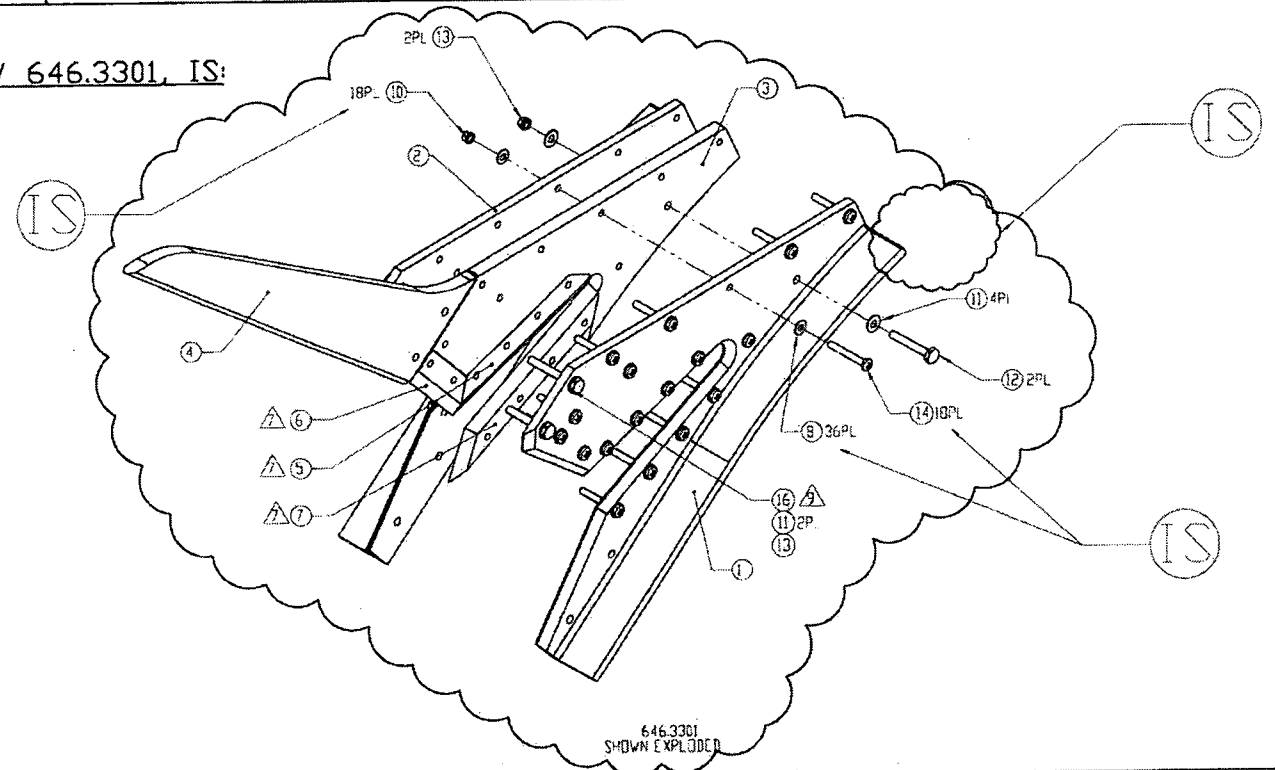
CHANGE CATEGORY
☐ MAJOR ☒ MINOR

DER REVIEW REQUIRED
☐ YES ☒ NO

106057

APICAL INDUSTRIES, INC.	ENGINEERING CHANGE NOTICE NO. 02196		SHEET 1 OF 2	
	DWG NO. 646.3300	REV: N/C	PREPARED BY S. HUFF	DATE: 01/05/09
	EFFECT ON DWG <input type="checkbox"/> INC. <input checked="" type="checkbox"/> UNINC.			
DWG TITLE: UPPER CUTTER ASSY				
APPROVED BY: ENGR <i>[Signature]</i>	MFG <i>[Signature]</i>	QC <i>[Signature]</i>	EFF: NEXT ORDER	
REASON: REMOVED RIVETS IN FAVOR OF ADDITIONAL SCREWS				
TRANSACTION CODES (TC): A-ADD C-CREATE R-REVISE D-DELETE				

SHEET 1, VIEW 646.3301, IS:



14	R	601.2765	18	SCREW	MS27039-0819
10	R	601.1541	18	LOCKNUT	MS21042L08
9	D	601.2766	3	RIVET	MS20470AD5-18
8	R	601.2764	36	WASHER	NAS1149FN832P
			.3301		
F/N	TC	PART NUMBER	QTY	DESCRIPTION	MATERIAL/SPECIFICATION
DOCUMENTS EFFECTED:					CHANGE CATEGORY <input type="checkbox"/> MAJOR <input checked="" type="checkbox"/> MINOR
<input type="checkbox"/> MDL <input checked="" type="checkbox"/> INSTALL INSTRUC <input checked="" type="checkbox"/> ICA <input type="checkbox"/> FMS <input checked="" type="checkbox"/> BDM					DER REVIEW REQUIRED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

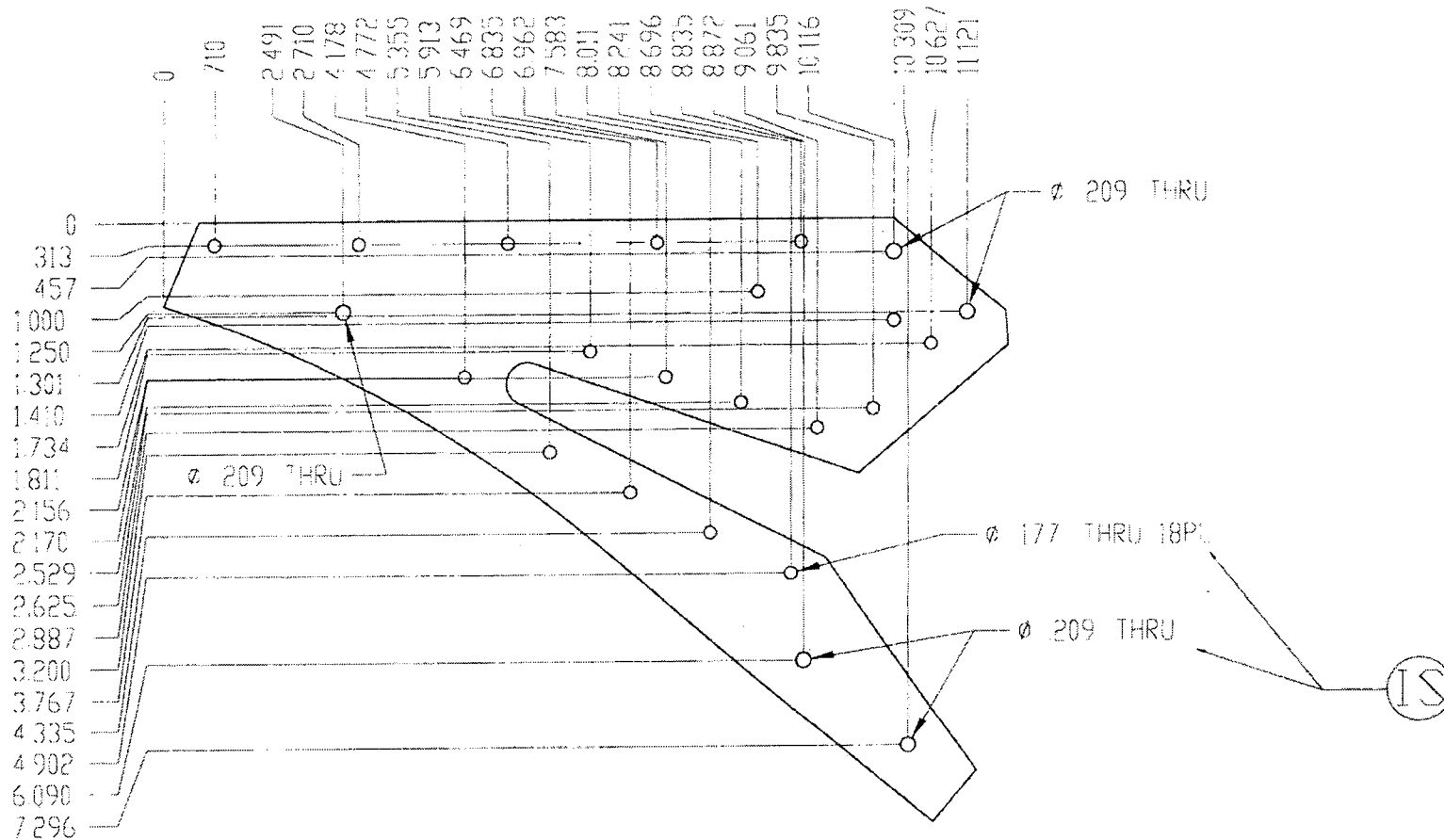
106057

APICAL INDUSTRIES, INC.

ENGINEERING CHANL ORDER NO. 02196

SHEET 2 OF 2

SHEET 3, SECTION VIEW A-A, IS:

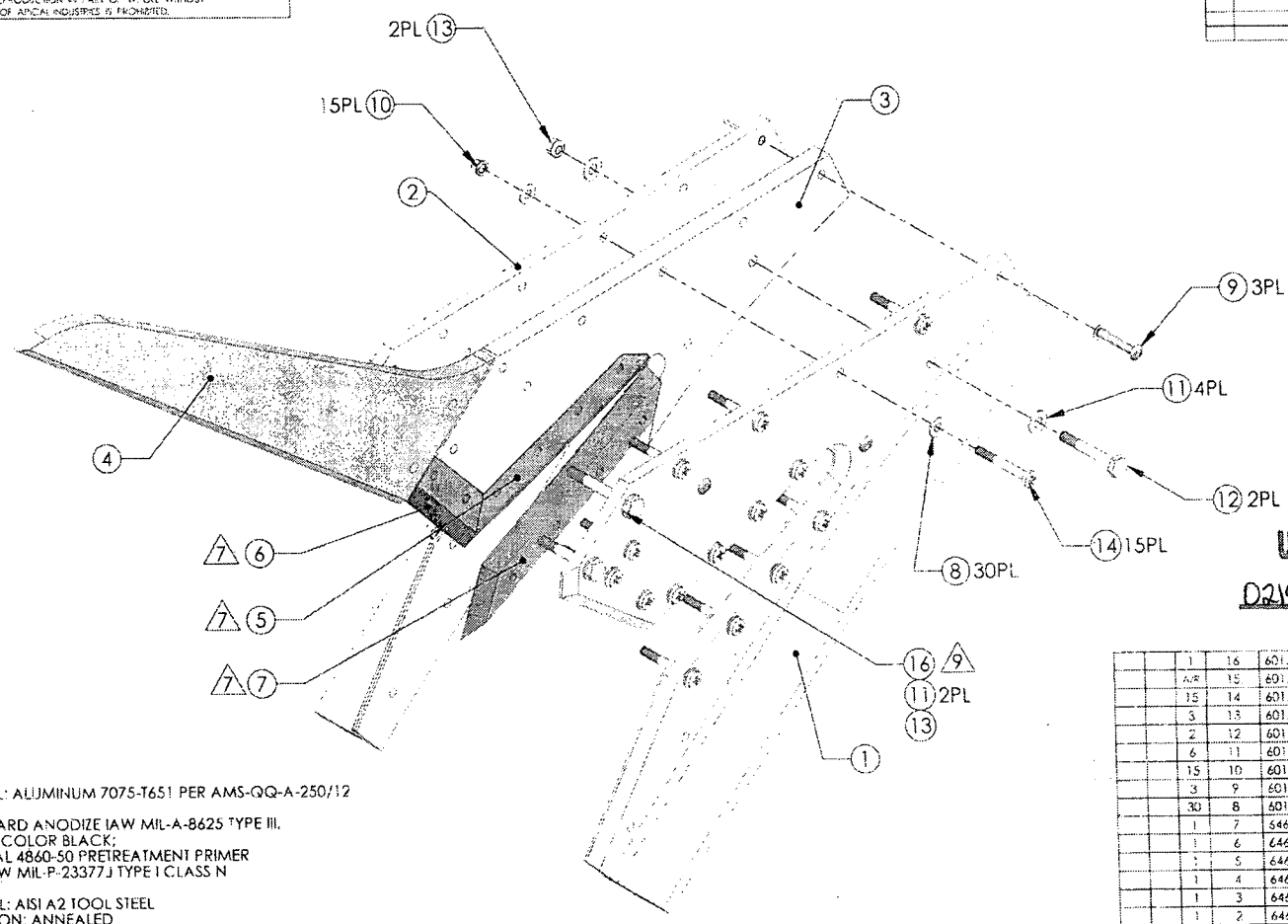


F/N	TC	PART NUMBER	QTY	DESCRIPTION	MATERIAL/SPECIFICATION

106057

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REV	DESCRIPTION	DATE	APPROVED



UNINCORPORATED ECN(S)

02196, 03724

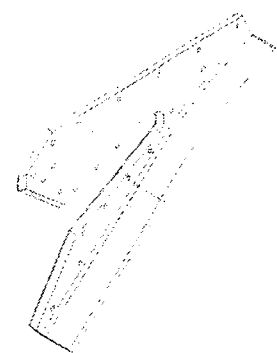
NOTES:

- 1 MATERIAL: ALUMINUM 7075-T651 PER AMS-QQ-A-250/12
- 2 FINISH: HARD ANODIZE IAW MIL-A-8625 TYPE III, CLASS 2, COLOR BLACK; CARDINAL 4860-50 PRETREATMENT PRIMER PRIME IAW MIL-P-23377J TYPE I CLASS N
- 3 MATERIAL: AISI A2 TOOL STEEL
CONDITION: ANNEALED
POST PROCESS: HEAT TREAT TO 58-62 Rc ROCKWELL HARDNESS
- 4 FINISH: PRIME IAW MIL-P-23377J TYPE I CLASS N
- 5. DEBURR AND BREAK ALL SHARP EDGES EXCEPT WHERE OTHERWISE NOTED
- 6. IDENTIFY IAW MPP-120
- 7 APPLY F/N 15 AS REQUIRED TO ALL FAYING SURFACES OF F/N 5, 6 & 7 UPON ASSEMBLY
- 8 CUTTING EDGE INTENDED TO BE SHARP, DO NOT BREAK SHARP EDGE
- 9 INSTALL FASTENER FINGER-TIGHT

646.3301
SHOWN EXPLODED

QTY	END #	PART #	DESCRIPTION	MAT'L	SPEC.
1	16	601.2834	BOLT	A193-141	
15	15	601.2045	RIV. LOCKTITE 598		
15	14	601.2765	SCREW	WATERPROOF 10-14	
3	13	601.1624	LOCKNUT	A193-141	
2	12	601.2763	BOLT	A193-141	
6	11	601.1607	WASHER	10-316/10-316	
15	10	601.1541	LOCKNUT	A193-141	
3	9	601.2766	RIVET	A193-141	
30	8	601.2764	WASHER	A193-141	
1	7	646.3316	BLADE		
1	6	646.3315	BLADE		
1	5	646.3314	BLADE		
1	4	646.3313	UPPER GUIDE		
1	3	646.3312	CENTER PLATE		
1	2	646.3311	RH HALF		
1	1	646.3310	LH HALF		
1		646.3301	UPPER CUTTER ASSY		
PARTS LIST					
APICAL INDUSTRIES					
2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760)724-5300					
UPPER CUTTER ASSY					
SCALE: NONE					
SHEET 1 OF 8					

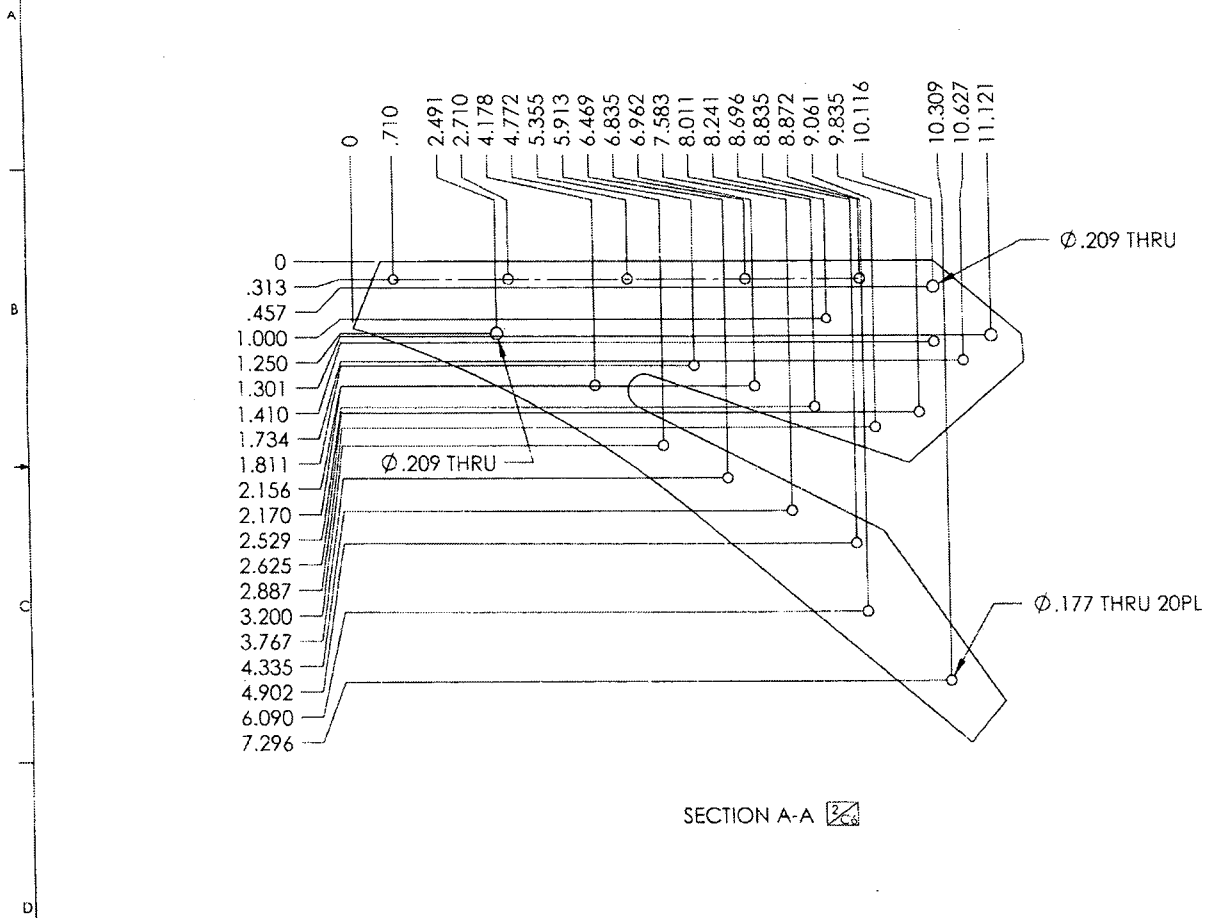
106057



DISC#P: 0211	08-26-08	APICAL INDUSTRIES											
DATE#IN: 01	08-26-08	2609 TEMPLE HEIGHTS DR											
DATE#IN: 01	08-26-08	OCEANSIDE, CA 92056-3512 (760)724-5300											
DATE#IN: 01	08-26-08	UPPER CUTTER ASSY											
DATE#IN: 01	08-26-08	<table border="1"> <tr> <td>QTY</td> <td>UOM</td> <td>DESCRIPTION</td> <td>PRICE</td> <td>TOTAL</td> </tr> <tr> <td>1</td> <td>EA</td> <td>UPPER CUTTER ASSY</td> <td>646.3300</td> <td>646.33</td> </tr> </table>		QTY	UOM	DESCRIPTION	PRICE	TOTAL	1	EA	UPPER CUTTER ASSY	646.3300	646.33
QTY	UOM	DESCRIPTION	PRICE	TOTAL									
1	EA	UPPER CUTTER ASSY	646.3300	646.33									

106057

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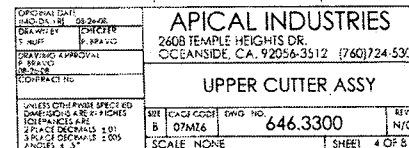


SECTION A-A

SECTION B-B

ORIGINAL DATE APICAL IND. 06/21/08		APICAL INDUSTRIES	
DRAWN BY S. MUIR		2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3612 (760)724-3300	
CHECKED BY P. BRAVO		UPPER CUTTER ASSY	
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE: 2 PLACE DECIMALS .005 ANGLES .5°		SIZE B	QTY 646.3300
SCALE NONE		SHEET 3 OF 6	

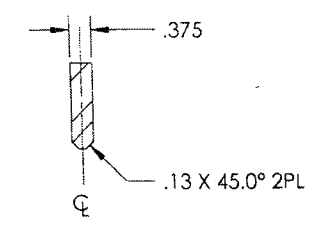
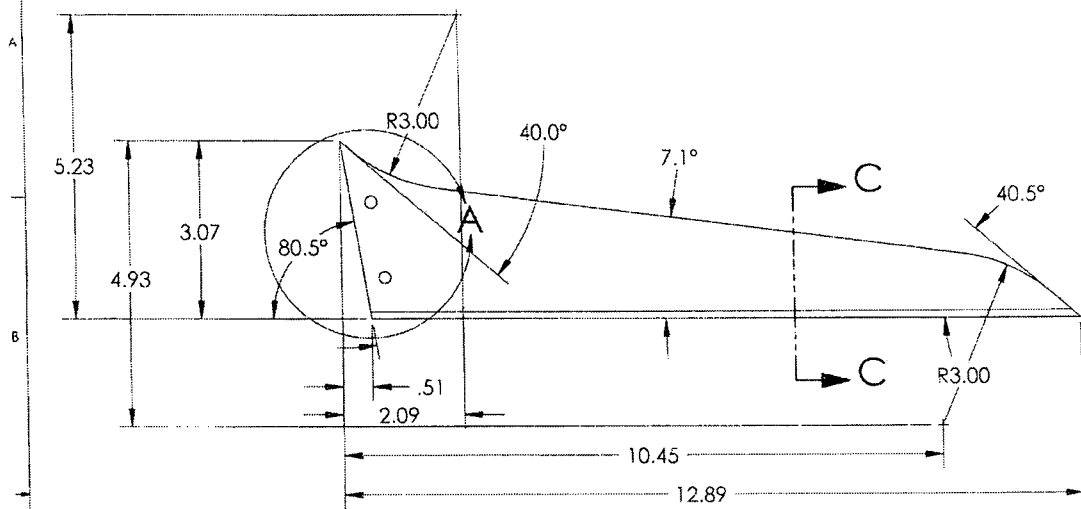
REV LONG			
REV	DESCRIPTION	DATE	APPROVE



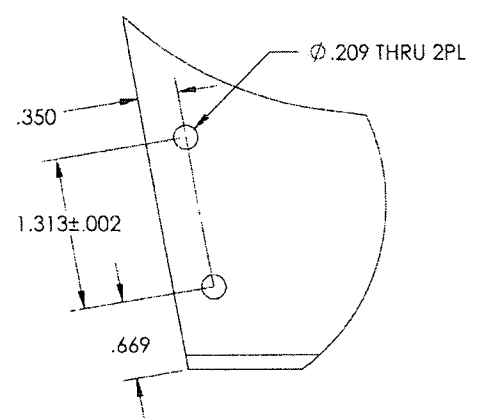
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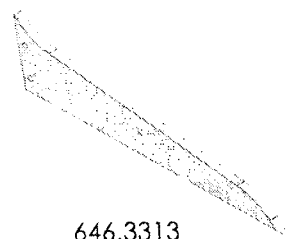
REV	DESCRIPTION	DATE	APPROVED



SECTION C-C



DETAIL A



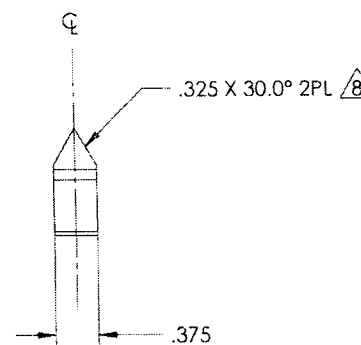
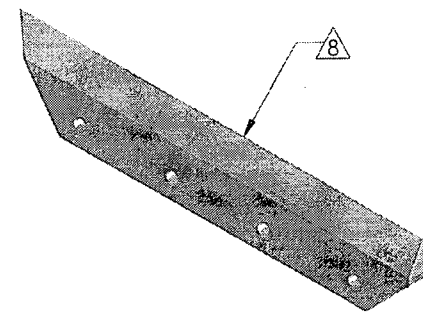
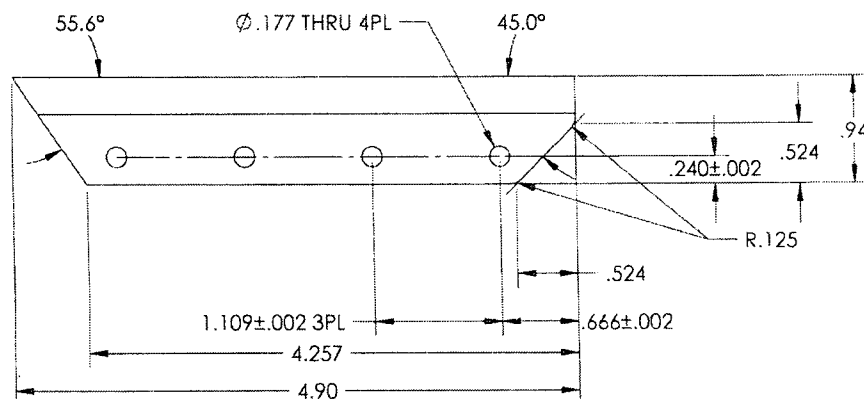
646.3313

ORIGINAL DATE AND DATE BY DE 24/08 DRAWN BY S. HICKER C. POPE P. BRANCO DRAWING APPROVAL P. BRANCO D. BRANCO CONTRACT 110		APICAL INDUSTRIES 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760)724-5300	
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES DECIMALS ARE 1 PLACE DECIMALS ±.01 2 PLACE DECIMALS ±.005 ANGLES ±.5°		SHEET CODE B 07M26	DWG NO 646.3300
SCALE NONE		REV N/C	SHEET 5 OF 6

106057

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REVISIONS			
REV.	DESCRIPTION	DATE	APPROVED



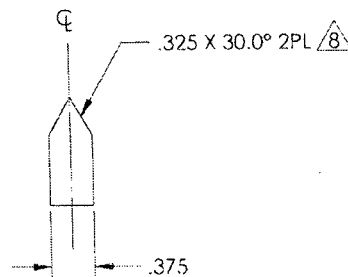
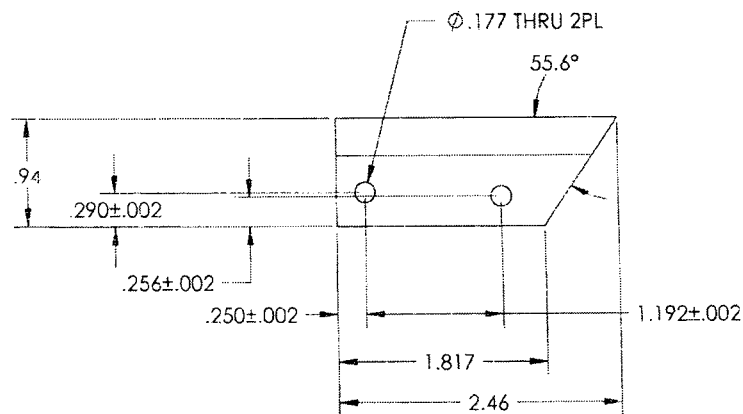
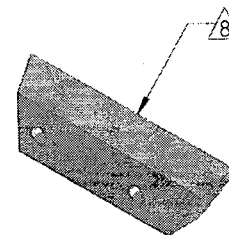
646.3314

DRAWN BY: J. H. H. 06-26-80 CHECKED BY: J. H. H. 06-26-80 DRAWING APPROVAL: J. H. H. 06-26-80 CONECT C 110		APICAL INDUSTRIES 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760) 724-5300	
UPPER CUTTER ASSY		CAT CODE: 646.3300 ENG. NO.: 07M26	REV: H/C
SCALE: NONE		SHEET: 6 OF 8	

106057

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REV	DESCRIPTION	DATE	APPROVED



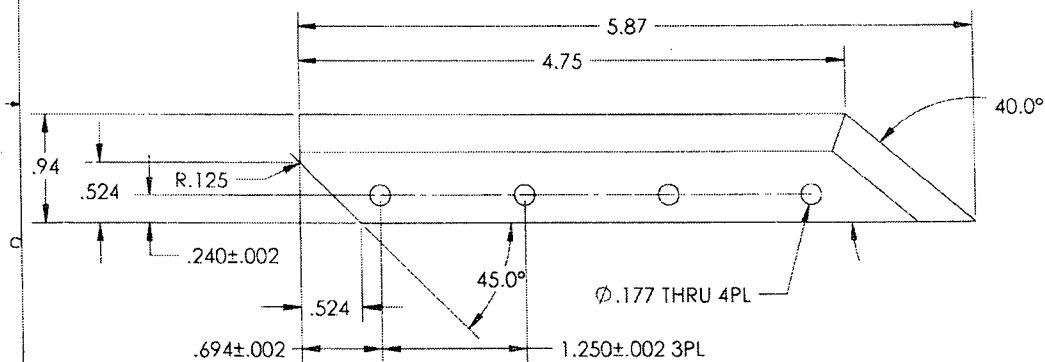
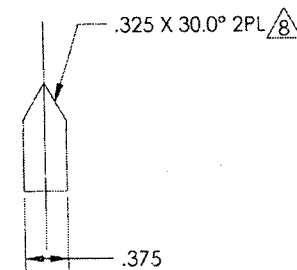
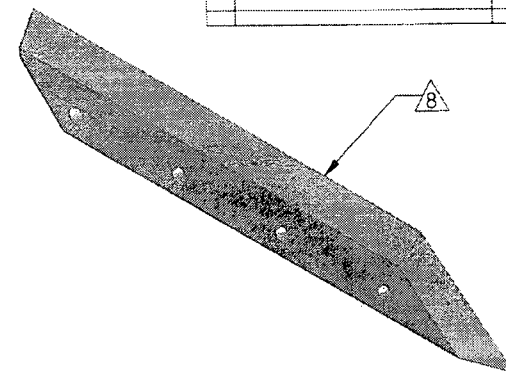
646.3315

OPERATOR DATE	DATE	APICAL INDUSTRIES
DRAWN BY	DATE	2608 TEMPLE HEIGHTS DR.
CHECKED BY	DATE	OCEANSIDE, CA. 92056-3512 (760)724-5300
APPROVED BY	DATE	UPPER CUTTER ASSY
DATE	646.3300	BY
SCALE	NONE	SHEET 7 OF 8

106 057

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REV	DESCRIPTION	DATE	APPROVED



646.3316

ORIGINAL DATE: 08-20-00 DRAWN BY: S. HUPP CHECKED BY: P. BRAVO DRAWING APPROVAL: [Signature] DESIGNED BY: [Signature] MANUFACTURED BY: [Signature]		APICAL INDUSTRIES 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760) 724-5300	
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE: 1. FRACTIONS DECIMALS ±.01 2. PLACES DECIMALS ±.002 ANGLES ±.5°		FILE CODE: 8 07M20 DWG. NO: 646.3300 SCALE: NONE	REV: N/C SHEET: 5 OF 8



A.T.G. Industries Inc.
731, rue Industrielle Rd.
PLATING DEPARTMENT
Rockland, On K4K 1T2
Canada
Ph: (613) 446-4544
Fax: (613) 446-4556

Pack List

Number: 62663

Date: 04-Oct-13

To

DART AEROSPACE LTD
1270 ABERDEEN ST.
HAWKESBURY, ON K6A 1K7
Canada

Ship To


DART AEROSPACE LTD
1270 ABERDEEN ST.
HAWKESBURY, ON K6A 1K7
Canada

Ph: 613-632-5200

Fax: 613-632-1185

Ph: 613-632-5200

Fax: 613-632-1185

Terms		Ship Via	
Quantity	Description		
1 lot	Part: ASST Rev: 5 PCS 646.3110 5 PCS 646.3311 5 PCS 646.9710 4 PCS 647.9613 2 PCS D4838-1 2 PCS D4838-2 HARD ANODIZE BLACK MIL-A-8625 TYPE III CLASS 2 PRIME MIL-P-23377J TYPE I CLASS N Job: 20130621 PO: PO21431 Line:		
Certificate of Conformance A.T.G. Industries certifies that all items in this shipment are in conformance with all requirements, specifications and drawings referenced in the purchase order. ISO 9001 : 2008 REGISTERED ATG SALES-2010 TERMS APPLY DATE: 4/10/13 CERTIFIED SIGNATURE:  RECEIVER SIGNATURE: 